

ISDH Hospital Fiscal 2004 Report and Statistical Comparison

Hospital: Select Specialty Hospital of Northwest Indiana

Year: 2004 City: Hammond Peer Group: Medium

Statement One: Summary of Revenue and Expenses

1. Gross Patient Service Revenue		4. Operating Expenses	
Inpatient Patient Service Revenue	\$33,887,519	Salaries and Wages	\$5,264,186
Outpatient Patient Service Revenue	\$0	Employee Benefits and Taxes	\$1,379,328
Total Gross Patient Service Revenue	\$88,887,519	Depreciation and Amortization	\$130,123
2. Deductions from Revenue		Interest Expenses	\$4,328
Contractual Allowances	\$16,585,715	Bad Debt	\$867,567
Other Deductions	\$37,618	Other Expenses	\$8,079,042
Total Deductions	\$16,623,333	Total Operating Expenses	\$15,704,027
3. Total Operating Revenue		5. Net Revenue and Expenses	
Net Patient Service Revenue	\$17,264,186	Net Operating Revenue over Expenses	\$1,486,206
Other Operating Revenue	(\$73,953)	Net Non-operating Gains over Losses	\$0
Total Operating Revenue	\$17,190,233	Total Net Gain over Loss	\$1,486,206

6. Assets and Liabilities	
Total Assets	\$12,328,483
Total Liabilities	\$1,503,478

Statement Two: Contractual Allowances			
Revenue Source	Gross Patient Revenue	Contractual Allowances	Net Patient Service Revenue
Medicare	\$29,008,973	\$15,214,877	\$13,794,086
Medicaid	\$0	\$0	\$0
Other State	\$0	\$0	\$0
Local Government	\$0	\$0	\$0
Commercial Insurance	\$4,878,546	\$1,408,456	\$3,470,090
Total	\$33,887,519	\$16,623,333	\$17,264,186

Statement Three: Unique Specialized Hospital Funds			
Fund Category	Estimated Incoming Revenue from Others	Estimated Outgoing Expenses to Others	Net Dollar Gain or Loss after Adjustment
Donations	\$0	\$0	\$0
Educational	\$0	\$0	\$0

Research	\$0	\$0	\$0
Bioterrorism Grant	\$3,000	\$3,000	\$0

Number of Individuals estimated by this hospital that are involved in education:

Number of Medical Professionals Trained In This Hospital 0

Number of Hospital Patients Educated In This Hospital 0

Number of Citizens Exposed to Hospital's Health Education Messages 0

Statement Four: Costs of Charity and Subsidized Community Benefits

Category	Estimated Incoming Revenue	Estimated Outgoing Expenses	Unreimbursed Costs by Hospital
Charity	\$0	\$0	\$0
Community Benefits	\$0	\$208,190	(\$208,190)

For further information on this report, please contact:

Hospital Representative Bill Shearer

Telephone Number 219/937-9900

**ISDH STATISTICAL COMPARISON BETWEEN THIS HOSPITAL
AND OTHER HOSPITALS IN ITS PEER GROUP**

PERFORMANCE INDICATOR	METHODOLOGY	THIS HOSPITAL'S RESULTS	PEER GROUP AVERAGE
1. # of FTE's	Number of Full Time Equivalents	117	137
2. % of Salary	Salary Expenses divided by Total Expenses	33.4%	36.6%
3. Average Daily Census	Patient Days divided by annual days (365 days)	34.1	29.4
4. Average Length of Stay	Number of Patient Days divided by the Number of Discharges	25.0	8.3
5. Price for Medical/Surgical per stay	Total Medical/Surgical charges divided by Medical/Surgical discharges	\$61,784	\$29,408
6. Gross Price per Discharge	Gross Inpatient Revenue divided by the Total Discharges	\$68,184	\$19,901
7. Outpatient Revenue Percentage	Outpatient Revenue divided by the Gross Total Revenue	0.0%	16.5%
8. Gross Price per Visit	Gross Outpatient Revenue divided by the Total Outpatient Visits	NA	\$833
9. % of Medicare	85.6%	85.6%	56.9%
10. % of Bad Debt	Bad Debt Expense divided by the Gross Operating Expenses	5.5%	3.1%

11. Charity Allocation	Unreimbursed costs of providing services to patients under adopted charity policy	\$0	(\$57,969)
12. Net Margin	Excess of Revenue over Expenses divided by the Total Operating Revenue	8.6	12.3

Note:

1. NP = No medical-surgical patients or outpatient visits.
2. See Statewide Results for definition of terms.